Case 15-11221 Doc 66 Filed 04/26/16 Entered 04/26/16 17:21:57 Desc Main

		Docum	ent Page 1 of /					
Fill in this information to identify your case:								
Debtor 1	Yvonne V. Skapa	rs						
	First Name	Middle Name	Last Name					
Debtor 2								
(Spouse if, filing)	First Name	Middle Name	Last Name					
United States Bankruptcy Court for the:		DISTRICT OF MASSAC	HUSETTS					
Case number (if known)	15-11221							

Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Par	t1: Summarize Your Assets		
		Your a	assets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	494,151.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	60,130.65
	1c. Copy line 63, Total of all property on Schedule A/B	\$	554,281.65
Par	t 2: Summarize Your Liabilities		
			iabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	401,110.73
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	50,928.10
	Your total liabilities	\$	452,038.83
Par	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	2,070.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	1,442.00
Par	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	r other sc	hedules.
7.	Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.	n personal	., family, or
	Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this	box and s	submit this form to

the court with your other schedules.

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Case number (if known) 15-11221 Debtor 1 Yvonne V. Skapars

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

1,148.00 \$

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on <i>Schedule E/F</i> , copy the following:	Total	claim
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	36,070.35
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	36,070.35

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Fill	in this information to ic	dentify your c	ase:				1				
		vonne V. S									
	ouse, if filing)										
Uni	ited States Bankruptcy	Court for the	: DISTRICT OF MASSA	ACHUSETTS							
1	se number	221					Chec	k if this is	:		
(If kr	nown)						■ A	n amende	ed filing		
										g postpetition Illowing date:	
	<u>fficial Form 1</u>						N	IM / DD/ Y	YYY		
S	chedule I: Yo	our Inc	ome								12/1
spo atta Pa	use. If you are separach a separate sheet to	ated and you o this form. mployment	are married and not filir ir spouse is not filing wi On the top of any addition	th you, do not inclu	ıde inforı	mati	on about	your spe	ouse. If mo	re space is	needed,
1.	Fill in your employr information.	ment		Debtor 1				Debtor 2	2 or non-fil	ing spouse	
		If you have more than one job,		☐ Employed				☐ Empl	oyed		
attach a separate information abou employers.		•	Employment status	■ Not employed				☐ Not e	mployed		
			Occupation								
	Include part-time, se self-employed work.	asonaı, or	Employer's name								
	Occupation may include or homemaker, if it a		Employer's address								
			How long employed tl	nere?				_			
Pai	rt 2: Give Detail	s About Mor	nthly Income								
spoi	use unless you are sep	parated.	ate you file this form. If y	· ·	·					·	· ·
	e space, attach a sepa		ore than one employer, co this form.	ombine the informatio	on for all e	empi	byers for	that perso	on on the III	ies delow. If	you need
							For Del	otor 1		otor 2 or ng spouse	
2.	, ,		ry, and commissions (becalculate what the month)		2.	\$		0.00	\$	N/A	-
3.	Estimate and list m	onthly overt	ime pay.		3.	+\$		0.00	+\$	N/A	-
4.	Calculate gross Inc	ome. Add lir	ne 2 + line 3.		4.	\$		0.00	\$	N/A	

Debt	or 1	Yvonne V. Skapars	-	С	ase number (if k	nown)	15-1	11221		
					For Debtor 1			r Debtor		
	Con	by line 4 here	4.		\$	0.00	nor \$	n-filing s	pouse N/A	
	COL	y line 4 here	4.		Ψ	J.UU	Ψ_		IN/A	_
5.	List	all payroll deductions:								
	5a.	Tax, Medicare, and Social Security deductions	5a			0.00	\$		N/A	_
	5b.	Mandatory contributions for retirement plans	5b		. —	0.00	\$_		N/A	_
	5c.	Voluntary contributions for retirement plans	5c			0.00	\$_		N/A	_
	5d.	Required repayments of retirement fund loans	5d			0.00	\$_		N/A	_
	5e. 5f.	Insurance Domestic support obligations	5e 5f.			0.00 0.00	\$_ \$		N/A N/A	_
	5g.	Union dues	5g		· ———	0.00	\$-		N/A	_
	5h.	Other deductions. Specify:	5h	,	*	0.00			N/A	_
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	 6.	9	\$	0.00	\$		N/A	_
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	,		0.00	\$		N/A	_
8.		all other income regularly received: Net income from rental property and from operating a business,			·	<u></u>	· –			_
	oa.	profession, or farm Attach a statement for each property and business showing gross								
		receipts, ordinary and necessary business expenses, and the total								
		monthly net income.	8a			0.00	\$_		N/A	_
	8b.	Interest and dividends	8b).	\$	0.00	\$_		N/A	· <u> </u>
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive								
		Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c) .	\$	0.00	\$		N/A	
	8d.	Unemployment compensation	8d			0.00	\$_		N/A	_
	8e.	Social Security	8e) .	\$ 92	2.00	\$		N/A	-
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance)							_
		that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.								
		Specify: Food Stamps	8f.			8.00	\$		N/A	_
	8g.	Pension or retirement income	8g	,		0.00	\$_		N/A	_
	8h.	Other monthly income. Specify: Household Contribution	8h	1.+	\$ 1,000	0.00	+ \$_		N/A	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	2,07	0.00	\$_		N/A	A
10	Cal	aulata manthivinaama. Add lina 7 v lina 0	40	\$	0.070.00] . [- NI/A	•	0.070.00
10.		culate monthly income. Add line 7 + line 9. I the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	Φ_	2,070.00	+ \$		N/A	= \$ _	2,070.00
11.	State Included the Do it	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not cify:	depe				•	Schedule	e J. +\$	0.00
12.		If the amount in the last column of line 10 to the amount in line 11. The reside that amount on the Summary of Schedules and Statistical Summary of Certailies						e. 12.	\$	2,070.00
								'	Combi month	ned ly income
13.	Do :	you expect an increase or decrease within the year after you file this form	?							
		No.								
	1.7	Yes Explain:								

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Fill	in this informa	ation to identify yo	our case:								
Debtor 1 Yvonne V. Skapars Debtor 2 (Spouse, if filing) United States Bankruptcy Court for the: DISTRICT OF MASSACHUSETTS						Check if this is: An amended filing A supplement showing postpetition chapter 13 expenses as of the following date: MM / DD / YYYY					
Cas		5-11221			<u> </u>		101101	17 557 1111			
		orm 106J : J: Your l	Expen	ises					12/1		
info	ormation. If n		eded, atta	If two married people and the short sheet to this not the sheet to this not sheet to this not show the sheet to the sheet							
1.		o line 2. es Debtor 2 live i No 'es. Debtor 2 mus	·	ate household? al Form 106J-2, <i>Expenses</i>	s for Separate House	ehold of De	ebtor 2	2.			
2.	•		■ No □ Yes.	Fill out this information for each dependent	Dependent's relati Debtor 1 or Debtor		- -	Dependent's age	Does dependent live with you? No Yes No Yes No Yes No Yes No		
3.	expenses of yourself an	penses include of people other to d your depende	han nts? □	No Yes					☐ Yes		
Est exp	imate your e	a date after the l	our bankrı	y Expenses uptcy filing date unless y y is filed. If this is a supp	ou are using this followed	orm as a s e <i>J</i> , check	supple the b	ement in a Cha ox at the top o	pter 13 case to report f the form and fill in the		
the		h assistance an		government assistance i luded it on <i>Schedule I:</i> Y				Your expe	enses		
4.		or home owners nd any rent for the		ses for your residence. I r lot.	nclude first mortgage	e 4.	\$_		0.00		
	If not inclu	ded in line 4:									
_	4b. Prope 4c. Home 4d. Home	estate taxes erty, homeowner's e maintenance, re eowner's associat	epair, and ution or cond	pkeep expenses dominium dues		4a. 4b. 4c. 4d.	\$ _ \$ _ \$ _		118.22 0.00 50.00 0.00		
5.	Additional	mortgage payme	ents for yo	our residence, such as ho	me equity loans	5.	\$_		0.00		

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Debtor 1 Yv	onne V. Skapars	Case numl	per (if known)	15-11221
6. Utilities:				
	ectricity, heat, natural gas	6a.	\$	220.00
	ater, sewer, garbage collection	6b.	\$	25.78
	lephone, cell phone, Internet, satellite, and cable services	6c.	•	167.00
	ner. Specify:	6d.	·	0.00
	d housekeeping supplies	7.	\$	300.00
	e and children's education costs	8.	\$	0.00
		9.	\$	
_	, laundry, and dry cleaning I care products and services	9. 10.	\$	85.00
	·			20.00
	and dental expenses	11.	\$	60.00
	rtation. Include gas, maintenance, bus or train fare. clude car payments.	12.	\$	100.00
	nment, clubs, recreation, newspapers, magazines, and books	13.	·	30.00
	le contributions and religious donations	14.	•	0.00
15. Insuranc	_	14.	Ψ	0.00
	clude insurance deducted from your pay or included in lines 4 or 20.			
	e insurance	15a.	\$	140.00
	alth insurance	15b.	•	0.00
	hicle insurance	15c.	•	126.00
	ner insurance. Specify:	15d.	·	0.00
	o not include taxes deducted from your pay or included in lines 4 or 20.	1Ju.	–	0.00
Specify:	o not morado taxos doddotod from your pay or frididaed in lines 4 or 20.	16.	\$	0.00
	ent or lease payments:			
17a. Ca	r payments for Vehicle 1	17a.	\$	0.00
17b. Ca	r payments for Vehicle 2	17b.	\$	0.00
17c. Oth	ner. Specify:	17c.	\$	0.00
17d. Oth	ner. Specify:	17d.	\$	0.00
	ments of alimony, maintenance, and support that you did not report a		•	0.00
	d from your pay on line 5, Schedule I, Your Income (Official Form 106)). ^{18.}	·	0.00
	yments you make to support others who do not live with you.		\$	0.00
Specify:		19.		
	al property expenses not included in lines 4 or 5 of this form or on Sc			
	ortgages on other property	20a.		0.00
	al estate taxes	20b.	•	0.00
	operty, homeowner's, or renter's insurance	20c.	·	0.00
	intenance, repair, and upkeep expenses	20d.		0.00
20e. Ho	meowner's association or condominium dues	20e.	\$	0.00
1. Other: Sp	pecify:	21.	+\$	0.00
22. Calculate	e your monthly expenses			
	lines 4 through 21.		\$	1,442.00
	y line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2)	\$	1,772.00
		-	· · <u> </u>	4 440 00
22C. Add	line 22a and 22b. The result is your monthly expenses.		\$	1,442.00
23. Calculate	e your monthly net income.	'		
23a. Co _l	py line 12 (your combined monthly income) from Schedule I.	23a.	\$	2,070.00
	py your monthly expenses from line 22c above.	23b.	-\$	1,442.00
				·
	btract your monthly expenses from your monthly income.	23c.	\$	628.00
The	e result is your monthly net income.	23C.	Ψ	020.00
24. Do vou e	expect an increase or decrease in your expenses within the year after	vou file this	form?	
For examp	ole, do you expect to finish paying for your car loan within the year or do you expect yo			ease or decrease because o
	on to the terms of your mortgage?			
■ No.				
☐ Yes.	Explain here:			

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Fill in this information to identify your case:					
Debtor 1	Yvonne V. Skapa	rs			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the:		DISTRICT OF MASSAC	HUSETTS		
Case number	15-11221				
(if known)					

this is an d filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

	Sign Below								
Dic	d you pay or agree to pay someone who is NOT an attorney	to help	you fill out bankruptcy forms?						
	No								
	Yes. Name of person		Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)						
	Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.								
X	/s/ Yvonne V. Skapars	Х							
	Yvonne V. Skapars Signature of Debtor 1		Signature of Debtor 2						
	Date April 26, 2016		Date						